PTO/SB/17 (10-08)

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Effi Fees pursuant to the Conso	Application Nur			10/792,122-Conf. #3925				
			March 3, 2004					
FEE TRANSMITTAL			First Named Inv					
Fo		Examiner Name A. N. Gofman						
Applicant claims s	Art Unit	Art Unit 2162						
TOTAL AMOUNT OF PAYMENT (\$) 940.00			Attorney Docket	Attorney Docket No. 54		5486-0194PUS1		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION	ł							
1. BASIC FILING, SEAF	RCH, AND EX	AMINATION FEES						
	FIL		EARCH FEES	EXAMINA	ATION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$) Fee	Small Entity (\$) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)	
Utility	330	165 54		220	110			
Design	220	110 10	50	140	70			
Plant	220	110 336	) 165	170	85			
Reissue	330	165 54	270	650	325			
Provisional	220	110	) 0	0	0	***************************************	***************************************	
2. EXCESS CLAIM FEE	S						Small Entity	
Fee Description						Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues)						52	26	
Each independent claim over 3 (including Reissues)  Multiple dependent claims						220 390	110 195	
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$) Mu		Itiple Depende	ent Claims		
- or HP =		x =		Fee	<u>(\$)</u> <u>F</u>	Fee Paid (\$)	)	
HP = highest number of tota	l claims paid for, i	f greater than 20.						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)					
- or HP = HP = highest number of inde	enendent claims n	aid for if greater than 3	<del> </del>					
3. APPLICATION SIZE		ald for, it greater than 5.						
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra Sheets		additional 50 or fra	ction thereof	Fee (\$)	Fee P	Paid (\$)	
100 = /50 = (round <b>up</b> to a whole number) x						=		
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 1251 Extension for response within first month						810.00 130.00		
AUDITTED EV	-							
SUBMITTED BY Signature #58.73 (Attention No. 29,680 Telephone (703) 205-8000								
Name (Print/Type) Michael K. Mutter					<u> </u>	November 10, 2008		
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